

ISSUE SLIP STAPLE AREA (for additional cross references)

09/390,497

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	181	TS331	
O.I.P.E. CLASSIFIER		2/3	7/1/99
FORMALITY REVIEW	DMK	69169	9-21-99
	"	"	12-6-99

INDEX OF CLAIMS

..... Rejected N ..... Non-elected  
 ..... Allowed I ..... Interference  
 (Through numeral)..... Canceled A ..... Appeal  
 ..... Restricted O ..... Objected

Claim	Date
1	✓
2	✓
3	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here